

02-02-01

ATTORNEY DOCKET NO.: P-9153.01
Express Mail EL752209164US

THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

PATENT
Total Pages _____

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: James L. McMenimen, Christopher J. Campbell, Willa M. Fabian, Barbara K. Ruble, Larry G. Clark, David L. Thompson
TITLE: RESPONSIVE MANUFACTURING AND INVENTORY CONTROL

3C970 U.S. PTO



02/01/01

Assistant Commissioner for Patents
BOX PATENT APPLICATION
Commissioner of Patents and Trademarks
Washington, D.C. 20231

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Box Patent Application, Assistant Commissioner of Patents, Washington, D.C. 20231, "EXPRESS No. EL752209164US, on this 1st day of FEBRUARY, 2001.

FRAYDA M. NITSCHKE

Printed Name

Signature

3C970 U.S. PTO
09/775281
02/01/01

Sir:

We are transmitting herewith the attached:

X Patent Application Transmittal

X Specification:

Total pages: 25 (including claims and abstract: Spec. 21 sheets; Claims 3 sheets; Abstract - 1

X Drawings:

Total sheets: 4

☐ formal ☒ informal

X Combined Declaration and Power of Attorney: (UNSIGNED)

- ☐ newly executed
☐ copy from prior application
☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))
X Incorporation by Reference - The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

X Accompanying application parts:

- ☐ Notification of filing a
☐ Assignment of the Invention to Medtronic, Inc.
☐ Assignment cover sheet
☐ Information Disclosure Statement
☐ PTO Form 1449
☐ Copies of IDS citations
☐ Preliminary Amendment
☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.
X Return Postcard

IF A CONTINUING APPLICATION:

- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)
of prior application No. _____
☐ Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation
☐ division ☐ continuation in part of application number _____, filed _____.
☐ Cancel in this application original claims _____ of the prior application before calculating the filing fee.
(At least the original independent claim must be retained for filing purposes.)
☐ The prior application is assigned of record to Medtronic, Inc.
☐ The Power of Attorney in the prior application is to: GIRMA WOLDE-MICHAEL

X This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/180,289, filed FEBRUARY 4, 2000.


X Address all future correspondence to: GIRMA WOLDE-MICHAEL, Reg. No. 36,724
Medtronic, Inc., MS 301
7000 Central Avenue NE
Minneapolis, Minnesota 55432
phone: (763)514-6402

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	8	20	= 0	x 18	0
Independent Claims	3	3	= 0	x 80	0
Multiple Dependent Claims	0			+ 270	0
Basic Filing Fee					710
TOTAL					710

X Charge Deposit Account No. 13-2546 the sum of \$710.00 (Filing Fee) for a total of \$710.00.

X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546.. A duplicate of this transmittal is enclosed.

02/01/2001
Date


GIRMA WOLDE-MICHAEL, Reg. No. 36,724
MEDTRONIC, INC.
7000 Central Avenue N.E.
Minneapolis, Minnesota 55432
Telephone: (763) 514-6402